

## TEXAS BOARD OF VETERINARY MEDICAL EXAMINERS 2018 LICENSE RENEWAL FORM

333 Guadalupe Street, Suite 3-810 Austin, Texas 78701 (512) 305-7555

Names		License #:			
MAILING ADDRESS CHANGED? YesNo_	<del></del>	DVM	LVT EDP	SPECIAL	
Please complete information below. YOU MUST I	INCLUDE PHYSICAL HOME AND PRACTI	ICE ADDRESS, NO	OT A P.O. BOX.		
PHYSICAL/PRACTICE INFORMATION	MAILING INFORMATION	MAILING INFORMATION		HOME INFORMATION	
Clinic Name: Address:	Address:	Address:		Address:	
City, State, Zip:	City, State, Zip:		City, State, Zip:		
COUNTY: COUNTY:			COUNTY:		
COUNTRY:	COUNTRY:		COUNTRY:		
PHONE:	PHONE:		PHONE:		
FAX:	FAX:		FAX:		
EMAIL:	EMAIL:		EMAIL:		
EMPLOYMENT: (Employee, Owner, Other)	WORK: (Mobile, Relief)		PRACTICE:		
Zim 25 milet (Employee, Samer, Samer,	Troma (Mosne, Kener)		*See key below		
CA-Caprine         F-Feed Lot         GM-           D-Dairy         GS-Gov't., State         GSR-	Gov't., Fed Research IND-Industrial Gov't., Municipal LA-Large Animal Gov't., State Research LAB-Laboratory Animal Herd Health Consultation M-Military	MP-Mixed Practic O-Other OV-Ovine P-Primate PO-Poultry	ce R-Research RET-Retired RP-Ranch RT-Ratite S-Swine	SA-Small Animal T-Teaching U-Unknown Z-Zoo Animal	
<u>Payment Option 1</u> – <u>CHECK</u> - You may renew	w by mailing a check for the correct amoun	nt, which must be			
BOARD OF VETERINARY MEDICAL EXAMINERS OR TBVN	ME. Your payment must accompany this fo	orm. Checks retur	ned due to insufficient i	unds will be assessed a	
\$25.00 returned check fee.		Da			
<u>Payment Option 2</u> – <u>State Employee Only</u> – T funds should be made via interagency transaction vou considered "renewed", until all paperwork with required	scher (ITV). Note that you must still send $\gamma$ d signatures AND the payment has been rece	your renewal appl	ication with CE certifica	tion to us. You are not	
application and payment via ITV with your agency accou					
***Instructions for accounting department*** Fax a c day it is entered into USAS for payment. If payment is		-			
inactive, and amount paid. The following information is	provided for payment via ITV:				
Agency – 578 TIN – 35785785789000	RTI – 578001 Invoice#: Veterinarian's nar	me and license nur	mber		
RENEWAL FEES AND DEADLINES Your license is consider a delinquent license. If a license is delinquent for one year.	•		xpiration date. By law, y	ou <u>cannot</u> practice with	
ACTIVE OR MILITARY LICENSE - CONTINUING EDUCAT military practitioner, you must have earned the appropriate hours). You must maintain proper records as they are sindicated by you below. If you renew on-line, you will compliance inspection reveals information to the contral have complied with the continuing education required	riate hours of acceptable CE prior to renewing subject to inspection. Your signature below I have to certify that you have complied with ary, Board action will be taken against your li	ng your license for signifies either cor ith the CE requirer icense and you wil	2018 (DVM – 17 hours, mpliance, or exemption ments. Do <u>not</u> send CE	LVT – 10 hours, EDP – 6 for one or more reasons	
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renewal. Please refer to the Continuing Education Rule - 573.64, for detailed information). If you are already on inactive status and you want to continue inactive status, you must sign below. I wish to renew my Texas veterinary license under the provisions of the Inactive License Status. SIGNATURE REQUIRED (if inactive requested) I am exempt, by CE Rule, from the CE requirement for 2018 renewal: (check the applicable box) New licensee - obtained license during previous calendar year Resident or Intern (check Rule for CE after residency or internship has been completed) Charitable Mission (check Rule for CE after mission completed) Hardship Extension for 2018 Renewal (give date it was approved) I hereby verify that the information given above is true and correct to the best of my knowledge. SIGNATURE REQUIRED Ido not have the required number of CE hours for the current license renewal. I understand that I may renew my license but will be contacted by TBVME's enforcement personnel. SIGNATURE REQUIRED MILITARY OR RETIRED PRACTITIONERS ONLY - FEE WAIVER PROVISIONS - The Veterinary Licensing Act (Sec. 801.304 -Fee exemption) provides that licensees who are on active duty with the Armed Forces of the United States and do not engage in private or civilian practice; or license holders who are totally and permanently retired do not have to pay a fee but must renew by returning this form with applicable signatures. Military practitioners must comply with the CE requirement for renewal. Retired practitioners have no CE requirement. If you wish to come out of retirement, you may do so by paying applicable fees and complying with the other renewal requirements provided it is done within the same renewal year of initial retirement. If more than one renewal year has passed, you will be subject to reexamination and/or other re-licensing requirements. \_\_, DVM, do hereby certify that I am (check one and sign): 1. On active duty in the Armed Forces of the U.S. and do not engage in the private or civilian practice of veterinary medicine. (Also, please sign CE statement above.) Signature Required (Military) 2. Permanently and totally retired and will no longer practice veterinary medicine. Signature Required (Retired)

INACTIVE LICENSE - You cannot practice with an inactive license except on your own animals. The initial request (first time) for an inactive status MUST be made during your renewal period. If you miss the deadline, you must renew under the regular status, until the next renewal period. (CE is not required for inactive license

## SPECIAL LICENSE RE-CERTIFICATION

An integral part of the renewal process of your Special License is re-certification of your official employment or practice. Any change in status to an ineligible category will necessitate withdrawal of your special license privileges and revocation of the special license. The required form is attached and must be returned with this renewal form and the proper fee.

Acceptable certifying officials include:

Higher Education Dean or Assistant Dean
Animal Health Commission Executive Director
Texas Diagnostic Laboratory Executive Director

Under-Unrepresented Specialties Chief Executive Officer of the sponsoring organization in Texas

## ADDITIONAL LEGAL INFORMATION

SOCIAL SECURITY NUMBER REQUIRED -Section 231.302 of the Texas Family Code requires applicants and licensees to provide their social security number to the licensing agency. The social security number will be used for identification purposes within the Board and will be provided as required by the Family Code to the Texas Attorney General to assist in the administration of laws relating to child support enforcement. STUDENT LOANS -Section 57.491 of the Texas Education Code requires the Board to furnish license information to the Texas Guaranteed Student Loan Corporation. If you are identified by either organization as being in default on payments, it may jeopardize your license. You must enter into a loan repayment agreement and provide official proof of having done so prior to your license being renewed.

CRIMINAL CONVICTIONS AND/OR DISCIPLINARY ACTIONS IN ANOTHER STATE- Inform the Board if you have been charged with, convicted or indicted of or plead guilty or nolo contendere to a crime other than a Class C Misdemeanor traffic offense since your last renewal. Inform the Board if you have been disciplined in another State regarding your license to practice veterinary medicine in another country or state since you last renewed your license.